

SERIAL NUMBER 09/098,205	FILING DATE 07/27/98	CLASS 604 606	GROUP ART UNIT 3734/8	ATTORNEY DOCKET NO. A-2-2
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APPLICANT PHILIP E. EGGERS, DUBLIN, OH; HIRA V. THAPLIYAL, LOS ALTOS, CA.

****CONTINUING DOMESTIC DATA*******

VERIFIED THIS APPLN IS A DIV OF 08/795,686 02/05/97 Pat. No. 5,871,469

****371 (NAT'L STAGE) DATA*******

VERIFIED

****FOREIGN APPLICATIONS*******

VERIFIED PCT PCTUS9405168 05/10/94

FOREIGN FILING LICENSE GRANTED 07/16/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY OH	SHEETS DRAWING 17	TOTAL CLAIMS 58	INDEPENDENT CLAIMS 3
Verified and Acknowledged Examiner's Initials _____ Initials _____					

SEE CUSTOMER NUMBER: 021394

ADDRESS

TITLE

~~SYSTEMS AND METHODS~~ FOR ELECTROSURGICAL TISSUE TREATMENT IN CONDUCTIVE FLUID

FILING FEE RECEIVED \$1,626	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Bib Data Sheet

CONFIRMATION NO. 3785

SERIAL NUMBER 09/098,205	FILING DATE 07/27/1998 RULE	CLASS 606	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. A-2-2
APPLICANTS PHILIP E. EGGERS, DUBLIN, OH; HIRA V. THAPLIYAL, LOS ALTOS, CA;				
** CONTINUING DATA ***** THIS APPLICATION IS A DIV OF 08/795,686 02/05/1997 PAT 5,871,469				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 07/16/1998				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY OH	SHEETS DRAWING 17	TOTAL CLAIMS 58
Verified and Acknowledged Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 3		
ADDRESS 21394				
TITLE SYSTEMS AND METHODS FOR ELECTROSURGICAL TISSUE TREATMENT IN CONDUCTIVE FLUID				
FILING FEE RECEIVED 1626	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	